

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		20	10/29
FORMALITY REVIEW	Q	11/20	12/1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

- ✓ ..... Rejected
- ✓ ..... Allowed
- ✓ (Through numeral)... Canceled
- ✓ ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/22/03
2	✓	✓	3/22/03
3	✓	✓	3/22/03
4	✓	✓	3/22/03
5	✓	✓	3/22/03
6	✓	✓	3/22/03
7	✓	✓	3/22/03
8	✓	✓	3/22/03
9	✓	✓	3/22/03
10	✓	✓	3/22/03
11	✓	✓	3/22/03
12	✓	✓	3/22/03
13	✓	✓	3/22/03
14	✓	✓	3/22/03
15	✓	✓	3/22/03
16	✓	✓	3/22/03
17	✓	✓	3/22/03
18	✓	✓	3/22/03
19	✓	✓	3/22/03
20	✓	✓	3/22/03
21	✓	✓	3/22/03
22	✓	✓	3/22/03
23	✓	✓	3/22/03
24	✓	✓	3/22/03
25	✓	✓	3/22/03
26	✓	✓	3/22/03
27	✓	✓	3/22/03
28	✓	✓	3/22/03
29	✓	✓	3/22/03
30	✓	✓	3/22/03
31	✓	✓	3/22/03
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37	✓	✓	3/22/03
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42	✓	✓	3/22/03
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44	✓	✓	3/22/03
45	✓	✓	3/22/03
46	✓	✓	3/22/03
47	✓	✓	3/22/03
48	✓	✓	3/22/03
49	✓	✓	3/22/03
50	✓	✓	3/22/03

Claim	Final	Original	Date
51			
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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